

#3



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/748,717	12/22/2000	David M. Pangrac	ADVE:0011

CONFIRMATION NO. 4536

FORMALITIES LETTER



OC000000005793128

Law Offices of Gary R. Stanford
610 West Lynn
Austin, TX 78703

Date Mailed: 02/23/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 355 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- Total additional claim fee(s) for this application is \$602.
 - \$522 for 58 total claims over 20.
 - \$80 for 2 independent claims over 3 .
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

04/25/2001 WKOROMA 00000116 09748717

- The balance due by applicant is \$ 1022.

01 FC:201	355.00 OP
02 FC:202	80.00 OP
03 FC:203	522.00 OP
04 FC:205	65.00 OP

The application is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given TWO MONTHS from the date of this Notice within which to correct the informalities indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at



least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

A copy of this notice MUST be returned with the reply.

A handwritten signature in black ink, appearing to be "J. Q. Smith", written over a horizontal line.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY



Section #3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

David M. Pangrac, et al.

Serial No.: 09/748,717

Filed: December 22, 2000

For: A SYSTEM AND METHOD FOR
DISTRIBUTING INFORMATION
VIA A COMMUNICATION
NETWORK

§
§
§
§
§
§
§
§
§
§

Group Art: 2633

Examiner: Unassigned

Attorney Docket: ADVE:0011

Certificate Of Mailing

Pursuant to 37 C.F.R. Sec. 1.8, I hereby certify that this paper is being deposited with the United States Postal Service, as first class mail, in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, D.C. 20231, on April 18, 2001.

Deena Beasley
Deena Beasley

**RESPONSE TO NOTICE TO FILE MISSING PARTS
OF NONPROVISIONAL APPLICATION**

Box: Missing Parts
Commissioner for Patents
Washington, D.C. 20231

Sir:

This is in response to a Notice to File Missing Parts of Application under 37 CFR 1.53(b). Enclosed is a copy of said Notice and the following documents and fees to complete the filing requirements of the above-identified application.

(X) Executed Declaration and Power of Attorney. The above-identified application is the same application which the inventor executed by signing the enclosed declaration.

- (X) Statutory basic filing fee of \$355.00 (X) Utility () Design
- (X) Additional claim fees of \$602.00
- (X) Missing Parts Surcharge of \$65.00
- (X) Substitute Drawings (7 pages)

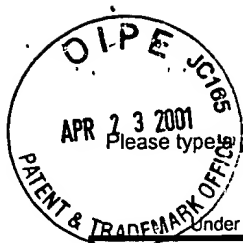
Please date stamp and return the enclosed postcard evidencing receipt of these materials.

Respectfully submitted,

Gary R. Stanford

Gary R. Stanford
Reg. No. 35,689

Dated: April 18, 2001



#3

APR 23 2001

Please type plus sign (+) inside this box →



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

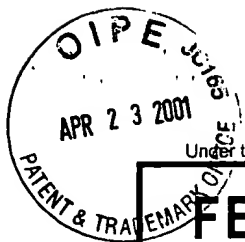
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/748,717
	Filing Date	Dec 22, 2000
	First Named Inventor	David M. Pangrac
	Group Art Unit	2633
	Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number	ADVE:0011

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Substitute Drawings	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Executed Declaration for Patent Application
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input checked="" type="checkbox"/> Executed Power of Attorney by Assignee
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	<input checked="" type="checkbox"/> Verified Statement (Declaration) Claiming Small Entity Status
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	<input checked="" type="checkbox"/> Return Postcard
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Gary R. Stanford, Reg. No. 35,689
Signature	<i>Gary Stanford</i>
Date	April 18, 2001

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: 			
Type or printed name	Deena Beasley		
Signature	<i>Deena Beasley</i>	Date	April 18, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



#3

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001		Complete if Known	
		Application Number	09/748,717
Patent fees are subject to annual revision.		Filing Date	12/22/2000
		First Named Inventor	David M. Pangrac
		Examiner Name	Unassigned
		Group Art Unit	2633
TOTAL AMOUNT OF PAYMENT	(\$ 1,022.00	Attorney Docket No.	ADVE:0011

METHOD OF PAYMENT		FEE CALCULATION (continued)																																											
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees and credit any overpayments to: Deposit Account Number: 50-1469 Deposit Account Name: Gary R. Stanford <input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																																											
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																													
FEE CALCULATION																																													
1. BASIC FILING FEE																																													
<table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>710</td><td>201</td><td>355</td><td>Utility filing fee</td><td>355.00</td></tr><tr><td>106</td><td>320</td><td>206</td><td>160</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>490</td><td>207</td><td>245</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>710</td><td>208</td><td>355</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1)</td><td>(\$)</td></tr></tbody></table>		Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	101	710	201	355	Utility filing fee	355.00	106	320	206	160	Design filing fee		107	490	207	245	Plant filing fee		108	710	208	355	Reissue filing fee		114	150	214	75	Provisional filing fee		SUBTOTAL (1)					(\$)		
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid																																								
101	710	201	355	Utility filing fee	355.00																																								
106	320	206	160	Design filing fee																																									
107	490	207	245	Plant filing fee																																									
108	710	208	355	Reissue filing fee																																									
114	150	214	75	Provisional filing fee																																									
SUBTOTAL (1)					(\$)																																								
2. EXTRA CLAIM FEES																																													
<table border="1"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from Below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>78</td><td>-20**= 58</td><td>X 9.00</td><td>= 522.00</td></tr><tr><td>5</td><td>-3**= 2</td><td>X 40.00</td><td>= 80.00</td></tr><tr><td colspan="3">Multiple Dependent</td><td></td></tr></tbody></table>		Total Claims	Extra Claims	Fee from Below	Fee Paid	78	-20**= 58	X 9.00	= 522.00	5	-3**= 2	X 40.00	= 80.00	Multiple Dependent																															
Total Claims	Extra Claims	Fee from Below	Fee Paid																																										
78	-20**= 58	X 9.00	= 522.00																																										
5	-3**= 2	X 40.00	= 80.00																																										
Multiple Dependent																																													
<table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td></tr><tr><td>102</td><td>80</td><td>202</td><td>40</td><td>Independent claims in excess of 3</td></tr><tr><td>104</td><td>270</td><td>204</td><td>135</td><td>Multiple dependent claim, if not paid</td></tr><tr><td>109</td><td>80</td><td>209</td><td>40</td><td>**Reissue independent claims over original patent</td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>**Reissue claims in excess of 20 and over original patent</td></tr><tr><td colspan="5">SUBTOTAL (2)</td></tr></tbody></table>		Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	103	18	203	9	Claims in excess of 20	102	80	202	40	Independent claims in excess of 3	104	270	204	135	Multiple dependent claim, if not paid	109	80	209	40	**Reissue independent claims over original patent	110	18	210	9	**Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)													
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description																																									
103	18	203	9	Claims in excess of 20																																									
102	80	202	40	Independent claims in excess of 3																																									
104	270	204	135	Multiple dependent claim, if not paid																																									
109	80	209	40	**Reissue independent claims over original patent																																									
110	18	210	9	**Reissue claims in excess of 20 and over original patent																																									
SUBTOTAL (2)																																													
** or number previously paid, if greater; For Reissues, see above																																													
		Other fee (specify)																																											
		SubTOTAL (3)																																											
		(\$) 65.00																																											

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Gary Stanford	Registration No. (Attorney/Agent)	35,689
Signature	<i>Gary Stanford</i>	Telephone	(512) 474-7678
		Date	April 18, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant commissioner for Patents, Washington, DC 20231.